

Washington, DC –Rep. Linda Sánchez (D-CA) announces that starting September 23, a slate of key patient rights and protections begins to take effect for the American people.

“This new “Patient’s Bill of Rights” is designed to put you and your doctor – not the health insurance companies -- back in charge of your health care. After decades of insurance company abuses, this “Patient’s Bill of Rights” will help restore peace of mind to Americans worried about their health care.

“Up until now, insurance companies have often left patients without coverage when they needed it most -- causing them to put off needed care or going deep into debt to pay for it. Too often, insurance companies have put insurance company bureaucrats between you and your doctor.

“The Patients’ Bill of Rights outlaws some of the most egregious practices of the insurance industry, while providing the stability and flexibility that families need to make the choices that work best for them.

“These reforms will improve the health coverage people get through their employers and individual health insurance policies they buy from insurers.”

Here is what the Patient's Bill of Rights will mean for you:

- **Up Until Now:** Insurance companies were able to retroactively cancel your policy when you became sick, if you or your employer had made an unintentional—and even unrelated—mistake on your paperwork.

Under Reform: The new law prohibits insurance plans from rescinding your coverage when you get sick, except in cases of fraud or an intentional misrepresentation of facts.

(Applies to all insurance plans.)

- **Up Until Now:** Every year, thousands of families have been denied insurance for their children just because they were born with a health condition or they have become sick.

Under Reform: The new law prohibits insurance plans both from denying coverage and limiting benefits for children based on a pre-existing condition. *(Applies to all employer plans and new individual plans.)*

- **Up Until Now:** Over 100 million Americans have been enrolled in insurance plans that impose lifetime limits on coverage – meaning when a catastrophic illness strikes, many were faced with massive debt and even bankruptcy.

Under Reform: The new law outlaws lifetime limits; no longer will a family go broke or lose their home just because a loved one has an accident or becomes seriously ill.

(Applies to all insurance plans.)

- **Up Until Now:** Even more aggressive than lifetime limits are annual dollar limits on what an insurance company will pay for health care. The insurance plans of millions of Americans have had such annual limits.

Under Reform: The new law phases out the use of annual limits; ensuring that the coverage of hundreds of thousands of Americans will no longer be cut off right when they need it most. *(Applies to all employer plans and new individual plans.)*

- **Up Until Now:** Most insurance companies did not allow parents to keep their young adult children on their plan even though many young adults do not receive employer-sponsored health care and do not make enough to purchase it in the individual market.

Under Reform: The new law requires insurance plans that offer family coverage to allow young people up to their 26th birthday to remain on their parents' insurance plan, at the parent's choice. *(Applies to young people who do not have access to their own employer-sponsored coverage.)*

- **Up Until Now:** Insurance companies didn't always make it easy to see the doctor you choose.

Under Reform: Patients are guaranteed their choice of primary care doctor within their plan's network of doctors, including OB-GYNs and pediatricians without a referral.

(Applies to new plans.)

- **Up Until Now:** Each year, thousands of Americans have gotten hit with exorbitant charges from their insurance company when they got sick or injured when they were away from home and used an out-of-network emergency room.

Under Reform: Under the new law, insurance plans will not be able to charge higher cost-sharing for emergency services that are obtained out of a plan's network.

(Applies to new plans.)

- **Up Until Now:** Millions of Americans did not have the right under their insurance plan to have an "external appeal" of insurance company decisions.

Under Reform: The new law prohibits insurance companies from denying coverage for needed care without a chance to appeal to an independent third party. (A
pplies to new plans.)

All of these provisions take effect for the next plan year starting on or after today. That means that they'll be in effect during your next open season in your employer plan or the next time you re-enroll in or purchase a policy from an insurer.

Many of these reforms will be expanded over time.

For example, once the Exchanges come into operation in 2014, the prohibition against denying coverage for pre-existing conditions for children will be extended to adults and annual limits on coverage will be prohibited.

Starting next year, insurance companies will be required to put more of your premium dollars into health care, and less into their profit margins and CEO pay.

Opponents of health care reform would repeal the law and take away these important consumer protections.

To learn more about these provisions and other ways that health reform will help you, please visit www.healthcare.gov .